

MHDS COMMISSION
March 18, 2021
9:30 am to 2:00 pm
Zoom – Approved April 15, 2021

MHDS COMMISSION MEMBERS PRESENT:

Betsy Akin	Richard Whitaker
Teresa Daubitz	Russell Wood
John Parmeter	Lorrie Young
Maria Sorensen	Sen. Sarah Trone Garriott
Cory Turner	

MHDS COMMISSION MEMBERS ABSENT:

Diane Brecht	Shari O'Bannon
Janee Harvey	Timothy Perkins

OTHER ATTENDEES:

Amber Alaniz	Tracy Liptak
Darci Alt	Melissa Loehr
Theresa Armstrong	Julie Maas
Teresa Bomhoff	James Maize
Tom Broeker	Susan Martin
Rachel Cecil	Michaele Niehaus
Katie Cownie	Lori Nosekabel
Liz Cox	Bill Ocker
Victoria Daniels	Caitlin Owens
William Dodds	Cheryl Plank
Mike Fidgeon	Libby Reekers
Tami Gilliland	Tori Reicherts
Emma Hall	Jordan Rico
John Hedgecoth	Jennifer Robbins
Mae Hingtgen	Flora Schmidt
Michael Jenkins	Lisa Schneider
Kathy Johnson	Susan Seehase
Bill Kallestad	Francie Tuescher
Kim Keleher	Ryanne Wood
Linda Kellen	Stephanie Yeoman
Rose Kim	Chad Zahn
Todd Lange	
Laura Larkin	

Materials Referenced:

February 18, 2021 Meeting Minutes
Optimae CMHC Designation Summary 3.12.21
Community Mental Health Centers (CMHCs) in Iowa 1.16.20
CMHC Map 9.24.20
SFY2020 MHDS Regions Statewide Dashboard SFY2021 Q2
Access Center Map

Adult Crisis Stabilization Residential Map
Children's Crisis Stabilization Residential Map
Intensive Residential Services Map
Access Centers and Adult Services Map

Welcome and Introductions

John Parmeter called the meeting to order at 9:45 am. John noted that since they were behind schedule he would forgo introductions for this meeting. Quorum was established with eight members present virtually. John asked Commission members to let the Commission know of any conflicts when voting.

Nominations Committee Report and New Appointments

John Parmeter informed the Commission that the Nominations Committee had received nominations for Russell Wood for Commission Chair and Lorrie Wood for Vice Chair. John questioned whether Commission members had any other names for nomination. Hearing none he indicated the committee would present those names for formal vote at the April meeting. There was discussion regarding the vacancies and possible upcoming vacancies on the MHDS Commission. It was noted that DHS has had conversations with the Governor's Office and indicated they were aware and reviewing applications

Review and Vote on February 18, 2021 Meeting Minutes

Russell Wood made a motion to approve the February 18, 2021 meeting minutes. Betsy Akin seconded the motion. The motion passed unanimously.

Request to be a Community Mental Health Center – Optimae LifeServices

Theresa Armstrong provided a very brief overview of the points that determined DHS's decision to make a recommendation. These points included Optimae's history of service in the three counties as the waived provider acting as a Community Mental Health Center (CMHC), collaboration with the Southeast Iowa Link (SEIL) Region for input on Optimae's level and quality of services, as well as the clause that indicates that mental health service providers that received a waiver prior to 2010 could be designated a CMHC even if they were for-profit. Laura Larkin briefly reviewed the document Optimae CMHC Designation Summary 3.12.21 to provide a general summary to Commission members on the process that is followed based on Iowa Code 230A for DHS to make the recommendation that they did.

There was discussion among Commission and DHS staff regarding the regulations in 230A. These discussion points included service provider notification and input, adoption of rules by Commission, background on last CMHC designation in 2017, how DHS addressed opportunity for choice for other providers to express interest, clarification and history regarding the exception that allows providers that were waived in lieu of a CMHC prior to 2010 to be designated a CMHC even if they are for-profit.

There was additional discussion by Commission members, DHS, and Optimae staff regarding Optimae's interest being a designated provider. Optimae staff presented information regarding the services they currently provide in the three counties as well as recommendations of support from stakeholders in the area. Information was provided by SEIL Regional CEO regarding their need for a designated CMHC. There was additional discussion by the group including what providers received notification to provide input regarding Optimae's request and what input was requested, the process if there were requests from multiple providers for the same county, and if and when there can be multiple CMHCs designated for one county.

Public Comment

Mike Fidgeon, Hillcrest Family Services, indicated that they were opposed to the approval of any CMHC in the three counties at this time. He indicated concerns regarding the demonstration of need, the moratorium on CMHC designations, the fact that DHS contacted the local provider office for input versus corporate leadership and healthcare shortage areas.

There was discussion regarding competition for staff and the fact that Optimae is not a new provider in the area. There was also discussion on the appropriateness of the law and letters of support for Optimae from Board of Supervisors and regional advisory boards.

Tom Broeker, Des Moines County Board of Supervisors and SEIL Governing Board, indicated that they have been trying to get a CMHC for some time, and he supports Optimae's request to be designated a CMHC.

Flora Schmidt, Iowa Behavioral Health Association, requested that the MHDS Commission give more consideration regarding designation of Optimae as a CMHC as she was concerned about due diligence in getting provider feedback in the area, confusion among CMHC providers regarding the lift in the moratorium, and concerns regarding Optimae being able to receive block grant funding.

Commission Discussion and Vote on Optimae Request

There was considerable discussion among Commission members staff concerning Optimae's request to be designated a CMHC. The discussion points included; issue larger than Optimae, the need for a more robust selection process, similar to an RFP, to give all interested providers opportunity to apply, oppositional views by providers, sustainability of CMHCs long-term, the moratorium and whether it was clear that it had been lifted.

There was additional discussion whether all non-CMHC counties should have the opportunity to complete this process and not just in this specific case, whether the Commission should adopt rules for the designation of CMHCs, as well as the need to reach a decision for this specific case.

Rich Whitaker motioned to adopt rules to outline appropriate processes, in accordance of 230A, for designation of CMHCs and to table the approval decision regarding Optimae's designation with regards to Lee, Jefferson and Des Moines counties until these rules are implemented. Betsy Akin seconded. There were comments by Commission members regarding the need for clarity with regards to this process and that when the Commission comes up with rules that they look at a process to engage providers to cover the eleven counties that do not have a CMHC designated. Motion passed unanimously.

John Parmeter requested volunteers to participate in a subcommittee to work with DHS on establishing rules regarding CMHC designation. Russell Wood, Rich Whitaker and Lorrie Young volunteered to serve on the subcommittee. DHS will set up a meeting to touchbase with the group about next steps. It was noted that rules are not a quick process and will require at a minimum 9 to 12 months.

Break

The Commission left for a brief break at 11:47 a.m. and returned from break at 11:55 a.m.

Update on Children's Behavioral Health System State Board

Rich Whitaker reported that Children's State Board met on March 9, 2021. Rich reviewed the highlights of the meeting.

- Departmental updates from Director Kelly Garcia and Brad Niebling, which included crisis services for children and families and the importance of engaging families in that process.
- Presentation by Dr. Caitlin Pedati from the Iowa Department of Public Health regarding self-harm in youth and the current trend in the state regarding adolescent females, and how we might better address those issues.
- Presentation by Janee Harvey from the Iowa Department of Human Services on Families First legislation and funding including what services are on the federal clearinghouse for services, advances made across the state in how this legislation is being implemented, specifically prevention activities under Title VI-E, the value of evidence-based services and practices and key decisions being made in Iowa.
- Presentation by Molli Cook and Nicole Mann on the Juvenile Assessment Center Model. Molli Cook is from the National Assessment Center which provides background, consultation and expertise with regard to the model. Nicole Mann spoke specifically about Scott County's efforts to develop a juvenile assessment center.
- Presentation by Joe Smarro with SolutionPoint regarding Crisis Intervention Training (CIT) for law enforcement and how it is being implemented across the state, including de-escalation and prevention.
- The agenda item regarding workforce recommendations was tabled until the next meeting as Beth Townsend, Director of Iowa Workforce Development was unable to present due to a conflict.

MHDS Update

COVID Vaccinations

Theresa Armstrong indicated that Commission members had previously requested information regarding vaccinations for individuals with disabilities. Theresa shared information provided by Iowa Department of Public Health (IDPH) regarding vaccinations for individuals with disabilities who are having accessibility issues (technology, transportation, etc.). IDPH has reached out to Managed Care Organizations and asked them to work with local public health to identify individuals with disabilities and provide location and appointment information to members and family members, including coordinating appointments for individuals who are homebound or unable to get out and making transportation arrangements for them.

Federal Funding

Under the American Rescue Plan Act (ARPA), which is the most recent legislation from the President, DHS has received notification that they will receive an additional \$6.48M for the Community Mental Health Block Grant (MHBG). MHDS will have two years to spend these funds, which is from March 15, 2021 to March 14, 2023. Set aside requirements will be the same including 10% set aside for First Episode Psychosis programs and 5% for crisis services. \$5.6M is the regular FFY21 allocation for the MHBG. The \$6.48M is additional dollars. There is also more support for Certified Community Behavioral Health Clinics (CCBHC) under the American Rescue Plan. The Substance Abuse Block Grant is also receiving additional dollars under the Plan. There are also more supports for suicide prevention, overdose prevention programs, specific programs as behavioral health needs increase related to the pandemic, and more dollars for Project Aware. Outside of SAMHSA funding the American Rescue Plan had some Medicaid-related increase in potential income into the State, including an optional 10% in the FMAP for Home and Community Based Services. There is also a potential optional

enhanced FMAP for mobile crisis that would qualify. Iowa Medicaid Enterprise is doing an analysis of the ARPA to see if we would qualify, the benefits and commitments required of the State.

Certified Community Behavioral Health Clinics

Iowa has several providers that are looking at applying for the CCBHC grant and that SAMHSA will often go back and look at previous requests for applications that were not funded and fund them. Community Health Centers of Southern Iowa and Heartland are two new CCBHCs in Iowa that were recently notified that they have received funding after previously submitting applications. At this time there are ten CCBHC providers in the State of Iowa.

COVID Recovery Iowa

DHS recently had a federal review and received positive feedback from FEMA and SAMHSA who implements this grant and indicated that if Iowa was interested to start writing an extension to DHS's Disaster Behavioral Health Program, referred to as COVID Recovery Iowa, beyond the current June 2021 end date. This is unusual as most FEMA grants have a hard deadline and don't permit extensions.

MHDS Requests for Proposal (RFP)

MHDS currently has two RFPs pending. One is the Peer Support and Family Peer Support Training contract to train peer support specialists, family peer support specialists and recovery peer coaches. Those proposals are in and MHDS hopes to announce the award April 7th. Currently the University of Iowa holds this contract. The second RFP is for the Projects for Assistance in Transition of Homelessness (PATH) contract. This is a SAMHSA grant that each state receives. Currently Iowa has seven providers. Providers must be from a metropolitan area. Proposals for this contract are due by April 14th, with a plan to announce on May 12th.

Employment First

DHS and MHDS has been very committed to the practice of Employment First for persons with disabilities. The past several years, MHDS has had a technical assistance grant that comes from the Office of Disability Employment Policy (ODEP). The current grant is called VOICE which MHDS is finishing up and the new grant MHDS received is called ASPIRE. One of the main goals of the grant is to bring evidence-based practice of the Individual Placement and Support (IPS) model to the State. MHDS will be working with stakeholders to develop a strategic plan.

Regional Dashboard Presentation

Rose Kim with the Division of Community Mental Health and Disability Services introduced herself and reviewed the SFY2020 statewide report including 2nd quarter regional data. Rose stated the first half of the dashboard is from data that Regions submit in December for FY2020. The second half includes data that the Regions submit on a quarterly basis. The information is self-reported by the Regions who have their way of verifying they meet the access standards. Rose noted that there were some changes in the data due to counties leaving or joining regions, COVID and individuals transitioning to Medicaid. Rose presented the dashboards.

There was discussion regarding access standards for children's services and complex mental health, state oversight for Regions, standardization across regions, and consequences of Regions not meeting an access standard consistently, the July 1, 2021 deadline for implementation of crisis services, and the State's role in holding Regions to the same standard.

Update on Services for Complex Needs and Children

Russell Wood presented several maps on the current status of complex mental health and children core services implementation within the MHDS Regions. Russell noted that the information was more up-to-date than the dashboards presented by DHS, and the maps are more reflective of what is currently in development and what the plan is moving forward.

Planning for Future Meetings

John Parmeter asked if there were any items that members would like included on the agenda for future meetings. It was noted that there will be a presentation on Home and Community Based Services (HCBS) waivers at the April meeting as well as that contact has been made by the Iowa Department of Public Health about presenting on the Iowa Youth Risk Behavior Survey and Iowa Youth Survey.

Public Comment

Todd Lange brought up the possible use of a hybrid approach for the statewide public meetings, including MHDS Commission, as this would open up access to people who might not be able to attend face-to-face. Todd also requested that the MHDS Commission possible look at another presentation on peer-run organizations as there have been several changes in the state.

Adjourn

The meeting adjourned at 1:58 p.m.

Minutes respectfully submitted by Wendy DePhillips.